TAXABLE YEAR

## California Exempt Organization Annual Information Return

FORM	
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199

Galendar Year 2010 or fiscal year beginning month day year and ending month day year  First Return Filed?	2010	) An	nual li	nformatio	n Retu	ırn				199
Corporation/Organization Name    Composition	Calendar Y			ginning month	day		, and end	ling month	day	year
Address  City  Chameleded Return?  D. Are you a subordinate affitiate in a group exemption?  So it is a group filting to affitiate? See General Instructions.  D. Are you a subordinate affitiate in a group exemption?  So it is a group filting to affitiate? See General Instructions.  So it is a group filting to affitiate? See General Instructions.  So it is a group filting to affitiate? See General Instructions.  So it is a stream of the number of affitiate?  See General Instructions.  So it is a stream of the subscript and the su	A First Retu	rn Filed?	_	Exempt under	Section 2370		sert letter)	CORP #		
City    A containing method used (1)   State   ZIP Code	Corporation/0	Organization Na	me					FEIN	_	
C Amended Return?	Address									
De Ace you authordinatealitation in a group exemption?	City							State	ZIP Code	
De Ace you authordinatealitation in a group exemption?										
Receipts and Revenues  A Total gross receipts from members and affiliates  A Total gross receipts for filing requirement test. Add line 1 through line 3. This line must be completed. If the result is less than \$25,000, see General Instruction B.  Total costs. Add line 5 and line 6.  Total costs. Add line 5 and line 6.  Total costs. Add line 5 and line 6.  Total costs or other basis, and sales expenses of assets sold  Total costs or subtract line 7 from line 4.  Expenses  Preparer's  Filing  Fee  Tilling fee \$10 or \$25. See General Instruction F.  11   1   0   12   0   13   0   14   Use tax. See General Instruction J.  15 Balance due. Add line 11, line 13, and line 14. Then subtract line 12 from the result.  Divide penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is representation of the penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is representation of the penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is resignature of officer  Firm's name (or yours, it self-employed) and address	(a) Is this (b) If "Yes (c) Are all (If "No. (d) Is this group (e) Federa (f) Is a ros  E Final return	a group filing for r," enter the numbe affiliates included ," attach a list. See a separate return ruling?	affiliates? See Ger of affiliates . ? e instructions.) filed by an organ	inization covered by a  thdrawn) ation)  Ilowing federal forms or I (Schedule H) 990 an 23701d and is exclusi primarily (50% or more) ang fee is required	Yes Yes Yes Yes Yes Schedule: vely religious, by public contr	□ No □ No □ No □ No □ No □ No	in any political campa (3) made an election If "Yes," complete an 23701d Organization Did the organization or byla complete an explanat Is the organization ex If "Yes," enter amoun Is the organization ur a prior year? Is the organization a I bid the organization of income?	aign or (2) attempted to in under R&TC Section 237 d attach form FTB 3509, s	offluence legis  04.5 (relating Political or L  ctivities, gove ported to the revised docum n 23701g? nonmember as the IRS an  /?	slation or any ballot measure, or or to lobbying by public charities egislative Activities by Section  Yes Yes rerning instrument, articles of Franchise Tax Board? If "Yes," ments Yes Yes Yes sources \$  udited in Yes Xable
2 Gross dues and assessments from members and affiliates and Revenues  4 Total gross receipts for filing requirement test. Add line 1 through line 3. This line must be completed. If the result is less than \$25,000, see General Instruction B.  5 Cost of goods sold 6 Cost or other basis, and sales expenses of assets sold 7 Total costs. Add line 5 and line 6. 8 Total gross income. Subtract line 7 from line 4.  8 Total gross income. Subtract line 7 from line 4.  9 Total expenses and disbursements. From Side 2, Part II, line 18. 9 Total expenses and disbursements. From Side 2, Part II, line 18. 9 Total expenses and disbursements. Subtract line 9 from line 8. 11 Filing fee \$10 or \$25. See General Instruction F. 12 Total payments. 13 Penalties and Interest. See General Instruction J. 14 Use tax. See General Instruction K. 15 Balance due. Add line 11, line 13, and line 14. Then subtract line 12 from the result.  15 Under penalties of perjury. I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is rue, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.  Preparer's Signature of officer  Preparer's Signature  Preparer's Signature    Preparer's Priny/SSN	Part I Co			•						ı
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## Signature of officer ## Preparer's Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is signature of officer ## I Date   Date   Date   Preparer's PTIN/SSN      9										
10   Excess of receipts over expenses and disbursements. Subtract line 9 from line 8.	Evnopose	-								
Filling Fee  11 Filling fee \$10 or \$25. See General Instruction F.	TYHGII262									
Title   Date   Preparer's   Signature   Firm's name (or yours, if self-employed)   and address   Title   Tit			•	•						
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Here Signature of officer  Preparer's Use Only  Preparer's  Firm's name (or yours, if self-employed) and address    Title	Sign	true, correct, ar	s ot perjury, I de nd complete. De	eciare that I have exami eclaration of preparer (c	ined this return other than taxpa	, including a ayer) is base	ccompanying schedule ed on all information of	es and statements, and t which preparer has any	o the best o knowledge.	r my knowledge and belief, it is
Preparer's signature  Preparer's  Suse Only  Preparer's  Firm's name (or yours, if self-employed)  and address  Date  Check if self-employed   Firm's name (or yours, if self-employed)  and address  Date  Check if self-employed   FEIN  Telephone  ( )	Here	Signature			[1	Γitle		Date	● Telep	phone
Preparer's signature  Preparer's  Suse Only  Preparer's  Firm's name (or yours, if self-employed)  and address  Date  Check if self-employed   Firm's name (or yours, if self-employed)  and address  Date  Check if self-employed   FEIN  Telephone  ( )		of officer							(	)
Paid Preparer's Use Only  Firm's name (or yours, if self-employed) and address  Telephone  ( )							Date		Prep	arer's PTIN/SSN
Firm's name (or yours, if self-employed) and address  Firm's name (or yours, if self-employed)  Telephone  ( )	Paid	signature						employed ▶ □		
if self-employed) and address  Telephone  ( )		Firm's name (	or yours.						● FEIN	I
		if self-employe								phono
May the FTB discuss this return with the preparer shown above? See instructions		and address							• Telep	onone
May the FTB discuss this return with the preparer shown above? See instructions			_						[ (	)
		May the FTB	discuss this	s return with the pr	eparer show	n above?	See instructions .		● □ Y	es 🗆 No

Organizations with gross receipts of more than \$25,000 and private foundations regardless of amount of gross recomplete Part II or furnish substitute information. See Specific Line Instructions.	eipts	_

		1 Gross sales or receipts from all business a	ctivities. See instructions			00		
		<b>2</b> Interest				00		
		<b>3</b> Dividends				00		
Rece		<b>4</b> Gross rents	4	00				
from Othe		<b>5</b> Gross royalties				00		
Sour		<b>6</b> Gross amount received from sale of assets				00		
oou.		<b>7</b> Other income. Attach schedule	'			00		
		8 Total gross sales or receipts from other so				100		
			_			00		
		Enter here and on Side 1, Part I, line 1				00		
		<b>9</b> Contributions, gifts, grants, and similar am				00		
		<b>10</b> Disbursements to or for members		00				
		11 Compensation of officers, directors, and tr	<b>1</b> 1	00				
Expe	nses	12 Other salaries and wages			12	00		
and		13 Interest			13	00		
	urse-	<b>14</b> Taxes				00		
men	ts	<b>15</b> Rents				00		
		<b>16</b> Depreciation and depletion (See instruction				00		
		17 Other. Attach schedule	•			00		
		<b>18 Total</b> expenses and disbursements. Add lir				00		
		*	-			<del></del>		
	nedu	le L Balance Sheets		of taxable year		ixable year		
Asse			(a)	(b)	(c)	(d)		
1 (	Cash .					•		
2	Vet ac	counts receivable				•		
3	Vet no	otes receivable. Attach schedule				•		
4	nvent	ories				•		
5	- edera	al and state government obligations				•		
6	nvesti	ments in other bonds. Attach schedule				•		
7	nvesti	ments in stock. Attach schedule				•		
		age loans (number of loans)				•		
		investments. Attach schedule						
		reciable assets						
		[	1	)	(	)		
		s accumulated depreciation		7				
		assets. Attach schedule				_		
		assets						
		and net worth						
		nts payable				•		
15	Contril	butions, gifts, or grants payable				•		
16	Bonds	and notes payable. Attach schedule				•		
<b>17</b>	Mortga	ages payable				•		
18	Other I	liabilities. Attach schedule						
19	Capital	I stock or principle fund				•		
		n or capital surplus. Attach reconciliation				•		
		ed earnings or income fund				•		
		iabilities and net worth						
Sch	nedu	le M-1 Reconciliation of income per books	with income per return		-			
		Do not complete this schedule if the	amount on Schedule L, I	ine 13, column (d), is	less than \$25,000			
1	Net in	come per books		7 Income records	d on books this year			
		al income tax		not included in t	•			
		xcess of capital losses over capital gains						
	Income not recorded on books this  8 Deductions in this return not charged							
	year. Attach schedule against book income this year.							
		ses recorded on books this year not		_		•		
deducted in this return. Attach schedule								
6 Total. 10 Net income per return.								
	Add lii	ne 1 through line 5		Subtract line 9 from line 6				